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Cuckfield Urban District Council

ANNUAL REPORT

OF THE

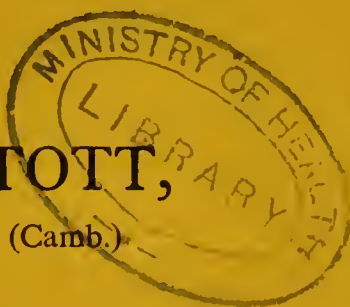
Medical Officer of Health

For the Year 1952

BY

WILLIAM B. STOTT,

L.R.C.P. & S. (Edin.), D.P.H. (Camb.)



CHARLES CLARKE (HAYWARDS HEATH) LTD.

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URBAN DISTRICT COUNCIL OF CUCKFIELD

REPORT

OF

THE MEDICAL OFFICER OF HEALTH

To the Chairman and Members of the Cuckfield Urban District Council.

I have the honour to submit my Annual Report for the year 1952.

The Crude Death Rate is 11.45 and this figure, when adjusted, gives a Corrected Death Rate of 8.81, which compares with 11.3 for England and Wales.

The Infant Mortality Rate is 4.90 as compared with 27.6 for the country as a whole and with 24.87 for 1951.

The Death Rate for Tuberculosis is 0.12 as compared with 0.24 for England and Wales.

No deaths occurred during the year from Diphtheria, Scarlet Fever, Whooping Cough, Measles or Typhoid Fever.

There was an increase in the number of cases of pulmonary tuberculosis which is partly accounted for by the notification of nine boys who attended a private school in the district. These cases came to light following a case of pulmonary tuberculosis in a master at this school. Following this occurrence a letter was sent to Headmasters of private schools in the Mid-Sussex area pointing out the desirability of all teachers attending the Mass Radiography Unit for an X-ray examination from time to time.

DIPHTHERIA IMMUNISATION

Since July, 1948, the County Council has been responsible for the administration of this scheme, and the County Medical Officer of Health has delegated the duties in connection with local arrangements to your Medical Officer of Health.

For the third consecutive year no case of diphtheria has occurred in this district, and in fact only five children have contracted diphtheria during the past twelve years.

On page 15 will be found details of the immunisation position in the district, and it will be seen that the percentage of immunised children from 0-15 years of age at the end of the year was 95.

Combined Diphtheria and Whooping Cough Immunisation

As from November, 1952, parents in the Mid-Sussex area have been offered facilities for the combined immunisation against diphtheria and whooping cough for children over the age of three months.

There was some doubt about the effectiveness of whooping cough prevention until the results of the Medical Research Council's trials were made known, but these proved that certain types of vaccine reduced the incidence of whooping cough in those inoculated and also markedly reduced the severity and duration of the illness in those who contracted it.

At the present time in this country whooping cough is dreaded more than diphtheria, due to the success achieved by immunisation against the latter disease. This should not lead to a feeling of complacency, and it is most important that immunisation against diphtheria be continued. As a combined whooping cough and diphtheria prophylactic is now available it is hoped that parents will accept the new procedure in the same way as they have done for diphtheria.

The following circular letter which explains the scheme is sent to every parent when a child reaches the age of three months.

“ Protection against Diphtheria and Whooping Cough

For many years now it has been the custom in this district for children to be immunised against diphtheria at about the eighth or ninth month, and this has been carried out by the family doctor or by Dr. Duke, Deputy Medical Officer of Health. For some time we have been trying to find a preparation which will protect against whooping cough, a disease which is likely to attack young infants severely, especially infants under one year. Approximately 300 children died of this disease in England and Wales last year.

A vaccine has now been found which makes your children less likely to catch whooping cough or if they do get it, makes serious illness and complications much less likely. It is given mixed with the diphtheria vaccine so the total number of injections will be less, and it has been decided to give all parents the chance of having their children treated free by this method.

As whooping cough is a serious matter in the first year of life, immunisation should be started as soon as possible after the age of three months, three injections at monthly intervals being required.

The new preparation is quite as good against diphtheria as the one we have been using, **and children can be tested, as before, three months after the last dose in order to make sure they are protected against this disease.**

I strongly advise you to take advantage of the combined immunisation ; but if you decide to have your child immunised only against diphtheria this would be done about the eighth or ninth month.

Your family doctor will give the injections or you can have it done by Dr. Duke at the special clinics which are held throughout the district, and the District Nurse or Health Visitor will advise you about these.

Will you please complete the attached form and return it to me in the enclosed stamped addressed envelope.”

Our experience has been that the great majority of parents are accepting the new scheme, a small minority preferring to wait until the eighth or ninth month and have only the inoculation against diphtheria.

Parke Davis W.D.P. is being used to immunise the children, and it has the advantage that it does not contain alum, a substance which is reputed to increase the risk of post-inoculation poliomyelitis when that disease is prevalent in the district. We have found that this antigen seems to cause less discomfort than injections against diphtheria alone and there have been very few reactions. It is too early yet to give the Schick Conversion Rate but, as evidenced by the number already tested, this antigen appears to be giving as good results as those for diphtheria alone. Few areas carry out the Schick test as practised here, but I regard it as very important to know if children are being properly protected, especially when new immunising agents are being employed and children are being inoculated as early as the third month, as it has been stated that children at this age may have antitoxin in their blood passed on from the mother which might interfere with the immunising process.

To summarise, the scheme as now carried out in this area is as follows :—

At the third month three injections of W.D.P. are given at monthly intervals, followed by a Schick test three months after the final injection. As an alternative children can be immunised at the eighth or ninth month against diphtheria only. At five years of age when the child enters school a reinforcing injection of A.P.T. is given. At ten years of age children are Schick tested, those requiring it receiving one or more injections of T.A.F.

In the Report of the Chief Medical Officer of the Ministry of Health for 1951 particulars are given of three outbreaks of diphtheria which occurred in England, and from a study of them certain facts were established. None of the twelve children who died had been immunised, and the value of immunisation was well illustrated by one of the children who died. This child, aged eight years, was the youngest of eight children, and all the others in this family had been immunised and escaped infection. The organism causing these outbreaks was of the gravis (virulent) type and the conclusion reached was that with a virulent organism, even comparatively recently inoculated persons may contract the disease, but in a mild form, and that reinforcing injections are necessary to maintain immunity.

All the testing and test reading throughout the area has been carried out by Dr. H. L. Duke, Deputy Medical Officer of Health. It is mainly due to his efforts and those of Miss F. M. Dean, Immunisation Clerk, together with the willing and efficient co-operation of the District Nurses and Health Visitors, that the scheme runs so smoothly and efficiently.

HEALTH EDUCATION

A new venture was started during the year, that of obtaining more education of senior schoolchildren in the subject of health and, as so much of what I have to say refers to the whole Mid-Sussex area, this account includes the Cuckfield Rural and Burgess Hill Urban Districts as well as this district.

It is well known that a great deal of disease and ill health is due to the lack of knowledge of the rules of health, and the Councils in this area have played their part in such ways as by holding Health Weeks, Clean Milk Competitions, Food Hygiene Exhibitions, the Diphtheria Immunisation Scheme, the instruction of food handlers by means of talks by the Medical Officer of Health and Sanitary Inspectors, talks to Women's Institutes, Townswomen's Guilds and other organisations and other similar activities.

I had come to realise that children when they left school at 15 years of age had a very limited knowledge of health matters, and I knew also that children were better subjects than adults for such instruction, the difficulty being of course how to provide this instruction. The opportunity came when a Headmaster made a request for a number of copies of my last Annual Report for his schoolchildren in their last year at school.

I have always tried to make my Annual Report as interesting as possible, and have gone to some trouble to write up certain features as a preface to the reports. In the three districts several hundred copies are sent out to Councilors, Officials, General Medical Practitioners, Health Visitors, District Nurses, Headmasters of Council Schools, Women's Institutes, Townswomen's Guilds and various other organisations. Although the local press give considerable publicity to the contents of the Report it has been rare to receive any observations except from Members of the Public Health Committee at the meeting at which the Report was presented. It came therefore as something of a shock

to be told on the phone by a Headmaster that he found my Report interesting, and that there was much in it which would be of benefit to his pupils. In addition to asking for a number of copies, he asked if I would be willing to attend at the school in a few weeks time to answer any questions on my Report. I was only too happy to comply with his request, and at the meeting with the children took the opportunity of giving a short talk on the duties of a Medical Officer of Health. It was obvious from the questions that the children were really interested in the subject, and had studied it, and I felt there was a future for this form of health education if I could obtain the necessary co-operation.

I then asked and obtained permission from the Chief Education Officer, East Sussex County Council, to approach Headmasters of Secondary Schools and schools with senior schoolchildren, and he left it to the Headmasters to agree with me about the form which the health education should take. The Headmasters, in every case, welcomed the idea and various schemes were started.

In one Secondary School the Headmaster arranged for the Science Teachers to give the instruction, the syllabus being agreed and included—water supply, sewage disposal, causes and prevention of disease, milk supply and pioneers in public health. It was arranged for me to give the introductory talk, at which I told of the achievements in preventive medicine and the action taken to prevent and limit outbreaks of infectious diseases. This was followed later by a talk by the Senior Sanitary Inspector on his work with special emphasis on food hygiene. The children were divided into groups and each compiled notes, diagrams and graphs on diseases, death rates, infant mortality, &c. Films were obtained on water, clean milk production, vaccination and immunisation. Visits have been made to the Mid-Sussex Waterworks, a model dairy, a dairy farm and a hospital. The work is being continued by using a series of broadcasting lessons on the subject of Health at Home and Work as follows :—

Vitamins, the school health service, controlling pests, health in the factory, the district nurse, health services.

I am grateful to the Headmaster for his helpful co-operation, and for his comprehensive report on the completion of the course, extracts from which I have embodied in the above review.

At a number of other schools the Headmasters asked me to give a course of talks, their point of view being that I would be talking from actual experience. In these schools I have given or am giving a series of weekly talks lasting about 40 minutes followed by 20 minutes for questions. The subjects included water supply, sewage disposal, milk supply, composition and preservation of food, food infections, causes and prevention of infectious diseases, the working of the body and personal hygiene.

The questions are usually numerous and of a high standard, and demonstrate the interest of the children in the subject.

I have outlined the two methods already tried and I always stress that it is for the Headmaster to decide which form, if any, it should take, and that I am available to give one or more talks if required. All the Headmasters inform me that they are desirous of continuing with this form of health education during one term every year so that this will mean that every child, before leaving school, will have received a comprehensive course of instruction in hygiene and public health.

Much has been achieved in the last twenty years by health education, and spitting is an example which springs to mind. At one time it was very common to see a person spitting in the streets and in public vehicles. This

habit is now rare and if anyone offends he is in no doubt of the attitude of his fellow men. What has been said of spitting applies equally to coughing and sneezing. There have been great strides also in personal cleanliness, the taking of baths and washing of hands especially when handling food and before meals are now regarded as normal procedure.

We must, however, go much further than disease prevention in our health education. We must teach how people can achieve optimum health as distinct from absence of disease. There is a great deal of ignorance about how the body works and the reasons why minor ailments appear. It so often happens that a minor ailment becomes a major one in course of time, due to neglect or to breaking one of the simple rules of health. It is well known that there is a great deal of ill health due to digestive disorders as shown by the large amount of digestive powders and tablets which are sold. I have heard it said that the amount of these consumed per head of the population in this country is several times that consumed in France. This would indicate that there is something radically wrong with our food habits, and it would seem that research into the causes would be fruitful and with the answer to hand education of the public could follow. In this connection I still remember our lecturer in anatomy impressing on us the small size of the normal stomach, and what people put into it and with what results ! I am afraid that the average person who owns a motor-car knows more about how it works and how to prevent it breaking down than he does about his own body.

MASS RADIOGRAPHY SURVEY

By arrangement with Dr. B. G. Rigden, Medical Director, East Sussex Mass Radiography Unit, a Survey was carried out in Haywards Heath in the spring of 1952. Examination was open to anyone living in this district and posters and leaflets giving particulars of the times for attendance were distributed throughout the district. A total of 1,123 persons attended, and two were found to have active pulmonary tuberculosis and sixteen inactive pulmonary tuberculosis. This survey not only brought to light early and generally unsuspected cases of pulmonary tuberculosis, but had a health education value in drawing the attention of the public to the facilities available for early diagnosis. It had been hoped to have a visit from the Unit during 1953, but owing to other commitments this will not be possible.

FOOD HYGIENE

Frequent inspections are carried out of all food premises and the standard of food hygiene continues to improve. The main points which catering establishments have to watch in preventing an outbreak of food poisoning are :—

1. Absence of supervision and control over possibly infectious conditions amongst the staff.
2. The slow cooling of heated meat foods.
3. Neglect of personal cleanliness, especially of washing the hands after use of the sanitary convenience.
4. The preparation of food the day before consumption and failure to store it at a sufficiently low temperature.
5. Failure to protect food from vermin.
6. Unnecessary handling of food.
7. Failure to cover food on display.

HOUSING

Mr. C. A. C. Ford, Housing Manager, has kindly furnished the following report on the Council's housing activities for the year.

During the year another 49 dwellings were completed and let on the Housing Estates, bringing the total number of post-war dwellings occupied at the 31st December, 1952, to 361. Including 67 prefabricated bungalows and 365 pre-war houses the total units of accommodation on the estates totalled 793 dwellings.

The 49 dwellings completed in 1952 were erected on the following estates :—

Haywards Heath—Bentswood Estate

Penn Crescent	34
Washington Road	6
Little Bentswood	1

Cuckfield—Glebe Road Estate

Glebe Road	8
--------------------	---

49

The types of dwellings erected comprised :—

Bungalows with two bedrooms	14
Houses with two bedrooms	4
„ three bedrooms	29
„ four bedrooms	2

49

In addition to the letting of new properties, vacancies occurred in 25 existing dwellings, but as 15 families were re-housed from requisitioned properties, which were to be released and returned to the owners, a net figure of 59 applicants on the waiting list were offered accommodation.

The waiting list of applicants, which at the beginning of the year was 369, was increased by a further 187 new applications received during the year and correspondingly reduced by 124 cancellations or lettings to a figure of 432 at the 31st December, 1952.

During the year a scheme for the erection of 18 aged persons' bungalows and warden's flat was approved and started, and at the time of preparation of this report the last of these dwellings was in process of occupation.

Each unit of accommodation consists of a living room with open fireplace, a bedroom recess sufficient for two persons, a kitchen with small food store and cupboard, and separate bathroom containing bath, washbasin and w.c.

All the bungalows and warden's flat are centrally heated and provided with hot water from a boiler house operated by the warden. Under the warden's flat is a communal room for the use of the bungalow inhabitants and their friends, with adjoining conveniences and kitchen. A communal workshop and small store is also included in the scheme.

The duties of the warden and his wife, in addition to attendance to boilers and tidying of communal rooms, is to temporarily assist any bungalow inmate in time of sickness until full-time help has been arranged.

The tenants of these bungalows make a weekly payment in addition to rent and rates to cover the cost of fuel required to provide hot water and central heating. The warden makes a similar contribution for fuel and pays a rent inclusive of rates which approximates to the weekly wage paid for services of himself and his wife.

The modernisation of pre-war houses continues with the replacement of kitchen ranges with an approved pattern open grate, incorporating a hot-water system carrying supplies of hot water to sink and bath. The replacement of gas lighting by electricity is also included, and to date work in 125 houses is complete.

WATER SUPPLY

(i) The water for the whole of the Urban District is supplied by the Mid-Sussex Joint Water Board. This was satisfactory in quality and quantity.

Monthly samples were taken for bacteriological analysis, and all were reported as being satisfactory.

(ii) The Board carried out monthly bacteriological examination of the raw water, and all were satisfactory. The water was chlorinated after filtration.

(iii) The supply is not liable to plumbo-solvent action.

(iv) There was no evidence of the supply being contaminated.

(v) Every house in the district is provided with a piped supply direct to the house.

My thanks are due to Mr. R. Staynes, Senior Sanitary Inspector, for his help and co-operation and for the particulars supplied for this Report, and to the other members of the Staff, and in particular to Miss Everson, my Secretary.

I should like to take this opportunity of expressing my appreciation of the consideration, support and assistance I have received from the Chairman and Members of the Public Health Committee.

I have the honour to be, Ladies and Gentlemen,

Your obedient Servant,

W. B. STOTT,

Medical Officer of Health.

PUBLIC HEALTH STAFF

<i>Medical Officer of Health</i>	..	WILLIAM B. STOTT, L.R.C.P. & S. (Edin.), D.P.H. (Camb.)
<i>Deputy Medical Officer of Health</i>		H. L. DUKE, O.B.E., M.D., Sc.D. (Camb.), D.T.M. and Hy.
<i>Senior Sanitary Inspector</i>	..	R. STAYNES, M.S.I.A., M.R.S.I. <i>Certified Meat Inspector</i>
<i>Additional Sanitary Inspector</i>	..	R. J. WEBB, M.S.I.A., M.R.S.I. <i>Certified Meat Inspector</i>
<i>Clerks to the M.O.H.</i>	..	Miss G. L. EVERSON Miss G. J. SHUTTLEWOOD
<i>Clerk to the S.S.I.</i>	..	Miss J. W. HAYLOR, A.I.Hsg.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA

Summary of Statistics for the years :

	1950	1951	1952
Area of District in Acres	3,912	3,912	3,912
Population estimated to middle of year	16,776	16,830	16,940
Rateable Value	£152,753	£156,799	£159,864
Sum represented by a Penny Rate ..	£559.1.7	£614.5.4	£630.11.11
Density of Population (persons per acre)	4.29	4.30	4.33
Number of Houses	4,648	4,678	4,773
Birth Rate per 1,000 population ..	12.04	11.94	12.04
Death Rate per 1,000 population ..	12.34	13.31	11.45
Infant Mortality Rate	24.75	24.87	4.90

CAUSES OF DEATH IN CUCKFIELD URBAN DISTRICT

	Males	Females
1. Tuberculosis, respiratory	2	-
2. Tuberculosis, other	-	-
3. Syphilitic disease	-	-
4. Diphtheria	-	-
5. Whooping Cough	-	-
6. Meningococcal infections	-	-
7. Acute poliomyelitis	-	-
8. Measles	-	-
9. Other infective and parasitic diseases	-	-
10. Malignant neoplasm, stomach	4	3
11. Malignant neoplasm, lung, bronchus	4	3
12. Malignant neoplasm, breast	-	4
13. Malignant neoplasm, uterus	-	-
14. Other malignant and lymphatic neoplasms	5	14
15. Leukaemia, aleukaemia	-	1
16. Diabetes	-	1
17. Vascular lesions of nervous system	12	12
18. Coronary disease, angina	17	18
19. Hypertension with heart disease	2	3
20. Other heart disease	18	25
21. Other circulatory disease	6	5
22. Influenza	-	-
23. Pneumonia	2	6
24. Bronchitis	3	1
25. Other diseases of respiratory system	-	-
26. Ulcer of stomach and duodenum	1	-
27. Gastritis, enteritis and diarrhoea	1	-
28. Nephritis and nephrosis	1	-
29. Hyperplasia of prostate	1	-
30. Pregnancy, childbirth, abortion	-	-
31. Congenital malformations	-	-
32. Other defined and ill-defined diseases	3	7
33. Motor vehicle accidents	3	-
34. All other accidents	2	2
35. Suicide	1	1
36. Homicide and operations of war	-	-
TOTALS	88	106

BIRTH RATE, CIVILIAN DEATH RATE AND ANNUAL ANALYSIS OF MORTALITY During the Year 1952 (Provisional Figures)

	RATE PER 1,000 CIVILIAN POPULATION		ANNUAL DEATH RATE PER 1,000 POPULATION									RATE PER 1,000 LIVE BIRTHS	
	Live Births	Still Births	All Causes	Typhoid and Para-Typhoid Fevers	Whooping Cough	Diphtheria	Tuberculosis	Influenza	Smallpox	Acute Poliomyelitis (including Polioencephalitis)	Pneumonia	Diarrhoea and Enteritis (Under 2 years)	Total Deaths under 1 year
England and Wales..	15.3	0.35	11.3	0.00	0.00	0.24	0.24	0.04	0.00	0.01	0.47	1.1	27.6
160 County Boroughs and Great Towns (incl. London)	16.9	0.43	12.1	0.00	0.00	0.00	0.28	0.04	—	0.01	0.52	1.3	31.2
160 Smaller Towns (Resident Population 25,000 to 50,000 at 1951 Census)	15.5	0.36	11.2	0.00	0.00	0.00	0.22	0.04	—	0.00	0.43	0.5	25.8
London	17.6	0.34	12.6	—	0.00	0.00	0.31	0.05	—	0.01	0.58	0.7	23.8
Cuckfield Urban	12.04 *13.48	0.18	11.45 *8.81	—	—	—	0.12	—	—	—	0.47	4.90	4.90

* Corrected death rate.

Corrected birth rate

Puerperal

The Maternal Mortality Rates for England and Wales are as follows :—Per 1,000 Total Births

Sepsis	0.09	Others	0.20	Total	0.29
Nil	Nil	Nil	Nil	Nil	Nil

The Maternal Mortality Rates for the Cuckfield Urban District are as follows

BIRTHS AND DEATHS

Births and Birth Rate :

The following table shows the Births registered for the year 1952 :—

		<i>Male</i>		<i>Female</i>		<i>Total</i>
Legitimate	.. ..	93	..	99	..	192
Illegitimate	.. ..	4	..	8	..	12
		—		—		—
Totals	.. ..	97	..	107	..	204
		—		—		—

This gives a rate of 12.04 per 1,000 population.

		<i>Male</i>		<i>Female</i>		<i>Total</i>
Total Stillbirths	.. ..	2	..	1	..	3
Legitimate ..	.. ..	2	..	1	..	3
Illegitimate..	.. ..	—	..	—	..	—

Deaths and Death Rate :

The following table shows the Deaths registered for the year 1952 :—

<i>Male</i>		<i>Female</i>		<i>Total</i>
88	..	106	..	194

This gives a mortality rate of 11.45 per 1,000 population.

The corrected death rate is 8.81.

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA

Laboratory Facilities

All milk and water samples, infectious disease and food poisoning specimens are sent to the Public Health Laboratory, Brighton. Medical practitioners send the specimens direct to the Laboratory, and they receive the report by telephone, a copy of such report being sent to this office.

My thanks are due to Dr. J. E. Jameson, for his informative reports and helpful advice on many occasions

Ambulance Facilities

Cases of infectious diseases are now removed by one of the two British Red Cross Society's ambulances stationed at Lavender's Garage, Sussex Road, Haywards Heath.

Hospital Accommodation for Infectious Diseases

Twenty-six beds are available at the Mid-Sussex Isolation Hospital for the treatment of cases of infectious disease, twelve of these beds are in a cubicle block and the other fourteen in a block consisting of two main wards and side wards.

A table on page 20 gives particulars of admissions during the year.

Smallpox

The South-East Metropolitan Regional Hospital Board state that cases of smallpox occurring in this district should be sent to the River Hospitals (Long Reach), Dartford, Kent.

CLINICS AND TREATMENT CENTRES

Infant Welfare Centres :

Cuckfield	Congregational Church Hall	2nd Friday Dr. each session
Franklands Village	The Institute	2nd Wednesday Dr. each session
Haywards Heath ..	E.S.C.C. Clinic, Oaklands, Haywards Heath	Every Friday Dr. 2nd and 4th Friday
Bentswood .. (Weighing Centre only)	Presentation Church Hall, New England Road, Haywards Heath	1st and 3rd Monday
Lindfield	The Tiger, High Street	1st Monday Dr. each session

Clinics :

Diphtheria Immunisation	E.S.C.C. Clinic, Oaklands, Haywards Heath	Every Monday 10 a.m. to 12 noon
Tuberculosis ..	E.S.C.C. Clinic, Oaklands, Haywards Heath	Every Thursday except 2nd Thursday
Orthopaedic ..	E.S.C.C. Clinic, Mill Road, Burgess Hill	Tuesday 9 a.m.-5 p.m. Friday 9 a.m.-12.30 p.m. Dr. usually attends 4th Wednesday at 10.15 a.m. (by appointment)
Speech Therapy ..	E.S.C.C. Clinic, Oaklands, Haywards Heath	Wednesday 9 a.m. (by appointment) Alternate Mondays 9 a.m. (by appointment)
Child Guidance ..	East Grinstead : Moat Road Lewes : Castlegate House Hove : 33 Clarendon Villas	Every Friday 10 a.m. (by appointment) Every Wednesday 10 a.m. (by appointment) Tuesday 10 a.m. Thursday 2 p.m.
Dental	E.S.C.C. Clinic, Oaklands, Haywards Heath	Tuesday and Thursday 10 a.m. and 1.30 p.m. (by appointment)
School Clinic ..	E.S.C.C. Clinic, Oaklands, Haywards Heath	Dr. Douglas (by appointment)
Family Planning ..	E.S.C.C. Clinic, Oaklands, Haywards Heath	2nd and 4th Wednesday 2 p.m. Dr. each session (by appointment)
Sub-Fertility ..	E.S.C.C. Clinic, Oaklands, Haywards Heath	1st Wednesday 2 p.m. Dr. each session (by appointment)

Venereal Diseases Facilities available at Royal Sussex County Hospital, Brighton

Men	Monday ..	4.30 p.m.
	Wednesday ..	9.30 a.m.
	Thursday ..	1.30 p.m.
Women and Children	Tuesday ..	1.30 p.m.
	Thursday ..	10.0 a.m.
	Saturday ..	9.30 a.m.

New cases must attend at least one hour before the Clinic closes

INFECTIOUS DISEASE

Notification Rates per 1,000 of the Population

Notifications	England and Wales	Cuckfield Urban
Typhoid Fever	0.00	—
Paratyphoid Fever	0.02	—
Meningococcal Infection ..	0.03	—
Scarlet Fever	1.53	0.35
Whooping Cough	2.61	4.55
Diphtheria	0.01	—
Erysipelas	0.14	0.06
Smallpox	0.00	—
Measles	8.86	2.60
Pneumonia	0.72	0.35
Acute Poliomyelitis (including Polioencephalitis)		
Paralytic	0.06	—
Non-paralytic	0.03	—
Food Poisoning	0.13	0.35

DIPHTHERIA IMMUNISATION

0-15 Years of Age

Number on roll	..	..	..	..	..	3,961
Number immunised	..	..	..	..	..	3,710
Percentage	..	..	..	..	..	95

The table below shows the immunisation figures for every school in the district :—

	On Roll	Immunised	Percentage
SCHOOLS : PRIMARY AND COUNTY SECONDARY			
Haywards Heath County Secondary	429	426	99
Haywards Heath County Primary..	362	357	99
St. Wilfrid's	352	350	99
Cuckfield	301	299	99
Lindfield	306	298	98
	1,750	1,730	99
NOT YET AT SCHOOL, or at school outside our area	317	312	99
SCHOOLS, Private	901	884	98
	2,968	2,926	99

During the year :—

- 166 children were immunised
- 311 children were Schick tested
- 287 children had a reinforcing injection

VACCINATION

152 children were vaccinated under the age of one year—a percentage of 78.

CASES OF INFECTIOUS DISEASE IN AGE GROUPS

	Total Cases Notified	Under 1 year	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-35	35-45	45-65	65 and over	Cases admitted to Hospital	Total Deaths
Scarlet Fever ..	6	-	-	-	-	1	4	-	1	-	-	-	-	-	-
Food Poisoning ..	6	-	-	-	-	-	1	-	1	1	1	2	-	-	-
Erysipelas ..	1	-	-	-	-	-	-	-	-	-	-	1	-	-	-
Pneumonia ..	6	-	-	-	-	-	1	-	-	-	2	2	1	2	-
Puerperal Pyrexia ..	8	-	-	-	-	-	-	-	-	5	3	-	-	-	-
Ophthalmia Neonatorum ..	6	6	-	-	-	-	-	-	-	-	-	-	-	-	-
Dysentery ..	2	-	-	-	-	-	-	-	-	-	-	1	1	-	-
Measles ..	44	-	-	1	4	1	20	12	2	3	1	-	-	-	-
Whooping Cough ..	77	2	6	6	10	8	38	2	1	1	1	-	2	-	-
Totals ..	156	8	6	7	14	10	64	14	5	10	8	6	4	2	-

TUBERCULOSIS—NEW CASES AND MORTALITY, 1952

Age Periods	New Cases				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	Males	Females	Males	Females	Males	Females	Males	Females
0 - 1 ..	-	-	-	-	-	-	-	-
1 - 5 ..	-	-	-	-	-	-	-	-
5 - 15 ..	9	-	-	-	-	-	-	-
15 - 25 ..	3	-	-	-	-	-	-	-
25 - 35 ..	2	1	-	-	-	-	-	-
35 - 45 ..	3	1	-	-	-	-	-	-
45 - 55 ..	5	1	-	-	-	-	-	-
55 - 65 ..	2	-	-	-	2	-	-	-
65 and over ..	2	1	-	-	-	-	-	-
TOTALS ..	26	4	-	-	2	-	-	-

COMPARATIVE TUBERCULOSIS STATISTICS, 1942-1952

Year	New Cases						Deaths						Number on Register at end of Year					
	Pulmonary			Non-Pulmonary			Pulmonary			Non-Pulmonary			Pulmonary			Non-Pulmonary		
	M	F	Total	M	F	Total	M	F	Total	M	F	Total	M	F	Total	M	F	Total
1942	6	5	11	2	2	4	2	1	3	-	1	1	30	34	64	11	17	28
1943	10	10	20	2	2	4	1	2	3	-	-	-	32	33	65	12	18	30
1944	7	3	10	1	1	2	3	2	5	-	-	-	38	35	73	13	18	31
1945	7	3	10	1	3	4	4	1	5	-	-	-	38	35	73	13	19	32
1946	11	2	13	2	4	6	5	2	7	-	-	-	39	31	70	15	22	37
1947	4	2	6	1	1	2	2	-	2	-	-	-	37	28	65	13	21	34
1948	5	1	6	1	-	1	2	1	3	-	-	-	38	28	66	13	19	32
1949	8	6	14	-	-	-	1	-	1	-	-	-	41	33	74	12	19	31
1950	8	11	19	6	4	10	3	-	3	-	-	-	35	41	76	16	22	38
1951	14	10	24	-	3	3	-	-	-	-	-	-	46	49	95	16	24	40
1952	26	4	30	-	-	-	2	-	2	-	-	-	71	49	120	15	21	36

TABLE SHOWING VITAL STATISTICS FOR THE YEARS 1938-1952

Year	Esti- mated Popula- tion	Number of Births						Birth Rate	Number of Deaths			Death Rate	Infants', Deaths			Infant Death Rate	Natural Increase of Births over Deaths
		Legitimate			Illegitimate				M	F	Total		M	F	Total		
		M	F	Total	M	F	Total										
1938	13,600	79	79	158	1	6	7	12.13	65	83	148	10.88	3	2	5	30.3	17
1939	13,880	89	96	185	3	1	4	13.61	66	106	172	11.73	3	5	8	41.4	17
1940	16,120	80	68	148	4	2	6	9.55	91	101	192	11.91	5	2	7	43.5	-38
1941	16,280	85	88	173	6	5	11	11.30	92	96	186	11.55	6	2	8	40.4	-2
1942	15,350	111	101	212	12	4	16	14.85	89	125	214	13.94	2	5	7	30.7	14
1943	14,620	115	107	222	12	14	26	16.96	71	117	188	12.86	3	3	6	24.19	60
1944	14,500	122	119	241	13	16	29	18.62	80	115	195	13.45	7	2	9	33.33	75
1945	14,260	91	99	190	9	15	24	15.00	83	92	175	12.27	3	2	5	23.36	39
1946	14,820	113	116	229	9	8	17	16.60	93	102	195	13.16	3	3	6	24.39	51
1947	15,130	133	134	267	5	6	11	18.37	78	113	191	12.62	4	5	9	32.37	87
1948	16,290	109	96	205	8	11	19	13.75	68	100	168	10.31	3	1	4	17.86	56
1949	16,370	114	99	213	6	8	14	13.87	91	109	200	12.22	3	3	6	26.43	27
1950	16,776	101	82	183	9	10	19	12.04	93	114	207	12.34	3	2	5	24.75	-5
1951	16,830	103	89	192	3	6	9	11.94	80	144	224	13.31	2	3	5	24.87	-23
1952	16,940	93	99	192	4	8	12	12.04	88	106	194	11.45	-	1	1	4.90	10

THE MID-SUSSEX ISOLATION HOSPITAL

I am indebted to the Matron, Miss J. M. Reid, for the following particulars of cases admitted during the year.

Disease	Cuckfield Rural District	Cuckfield Urban District	Burgess Hill Urban District	East Grinstead Urban District	Uckfield Rural District	Other Districts	Total
Poliomyelitis	7	-	3	1	3	1	15
Poliomyelitis and Pneumonia..	1	-	-	-	-	-	1
Observation Poliomyelitis ..	-	-	1	2	-	-	3
Scarlet Fever	13	-	-	1	1	-	15
Observation Scarlet Fever ..	-	-	-	3	2	-	5
Glandular Fever	1	-	-	-	-	-	1
Measles	3	-	-	1	3	1	8
Rubella	1	-	-	-	-	2	3
Whooping Cough	-	-	-	1	-	1	2
Observation Whooping Cough	1	-	-	-	-	-	1
Dysentery	2	-	-	-	-	-	2
Dysentery "Carrier"	1	-	-	-	-	-	1
Gastro-enteritis	1	1	-	-	-	-	2
Diarrhoea	-	-	-	1	-	-	1
Chickenpox	-	1	-	2	-	5	8
Chickenpox and Diarrhoea ..	1	-	-	-	-	-	1
Erysipelas	3	-	-	1	-	-	4
Encephalitis	1	-	1	-	-	-	2
Meningitis	-	-	1	-	-	-	1
Observation Tuberculous Meningitis	-	-	1	-	-	-	1
Mumps	4	-	-	-	-	-	4
Mumps and Orchitis	1	-	-	-	-	-	1
Vincent's Angina	1	1	-	-	-	-	2
Tonsillitis	3	-	-	-	1	-	4
Sinusitis	-	-	-	-	1	-	1
Bronchitis	-	1	-	-	-	-	1
Stomatitis	1	-	-	-	-	-	1
Pneumonia and Drug Rash ..	-	-	-	-	1	-	1
Drug Rash	-	-	-	-	-	2	2
Impetigo and Oedema of Face	-	1	-	-	-	-	1
Malaria	-	-	-	-	1	-	1
Mal-feeding	-	1	-	-	-	-	1
Tuberculosis (Pulmonary) ..	2	1	-	-	-	15	18
Totals ..	48	7	7	13	13	27	115

The Cubicle Block allowed thirty-two different diseases, observation cases or diseases with complications to be dealt with.

SANITARY SUPERVISION OF THE AREA

Mr. Staynes, Senior Sanitary Inspector, has furnished the following report on the sanitary supervision of the district.

Much attention continues to be given to the inspection of foodshops and food-preparing premises—a high standard of hygiene is maintained in such premises and during inspections the opportunity of discussing food hygiene with employers and employees is taken. The list of improvements to food premises will be seen to be small, this is due to the high standard already achieved and I feel food traders are to be commended for the efforts they have made.

Applications for the Registration of premises for the sale of ice cream continue to be received, and at the end of the year there were 65 premises on the register. No ice cream is manufactured in this district, and the majority of the premises registered are restricted to the sale of wrapped ice cream.

All public houses were re-inspected during the year, and I am pleased to record that the use of lead beer pipes to which I drew attention two years ago, has ceased in the area.

Meat inspection necessitated 135 more visits to the slaughterhouse than in the previous year, some 1,300 more carcasses were inspected, and the number of condemnations increased by 150. Much of this additional inspection involved work out of normal office hours, and negotiations with regard to overtime payment for meat inspection were opened with the Ministry of Food.

The Public Health Department receive more and more complaints every year of insect pests, particularly of wasps, bees, ants ; pests which cause a great deal of inconvenience and annoyance, and which in many instances cannot be dealt with by the occupiers of infested premises. It is not the Local Authorities' duty to deal with such pests, but as the service is not otherwise available, it is provided through the Public Health Department at a charge which covers its cost.

Inspection of Factories as to adequate means of escape in case of fire is carried out annually, and certificates are amended or re-issued as necessary. Although the onus of notifying the Local Authority of any alteration which affects means of escape is placed upon the owner, such alterations are often found at the time of inspection, the Factory proprietors being unaware of their obligation.

INSPECTIONS

*Slaughterhouses	640
Foodshops	1,123
Bakehouses	101
Dairies	105
Ice Cream Premises	113
Restaurant Kitchens	164
Primary Public Health Acts	132
Re-Inspections.. .. .	520
Primary Shops Acts	9
Re-Inspections.. .. .	112
Factories	148
Workplaces	5
Primary-Housing Act	90
Re-Inspections.. .. .	169
Schools	3
Public Conveniences	66
Caravans	39
Control of Building Works.. .. .	107
†Rats and Mice	3,740
Refuse Tips	29
Cattle Markets	6
Infectious Diseases	50
Food Poisoning	15
Swimming Pools	11
Miscellaneous	102
	<hr/>
	7,599
	<hr/>

* One-sixth of these visits were made by Sanitary Inspectors of the adjoining Rural District.

† This figure includes 3,498 visits made by the Council's Rodent Operative.

COMPLAINTS

Two hundred and four complaints were received and dealt with as under :—

Rats and Mice	136
Nuisances from Drains	1
Offensive Smells	10
Defective Housing Conditions	11
Accumulations of Refuse	3
Insect Pests (27 wasps, 1 ant, 1 flea, 2 beetles and 6 flies)	37
Miscellaneous	6
	<hr/>
	204
	<hr/>

STATUTORY NOTICES

Section 75, Public Health Act 1936

Served	4
Complied with by Owner	4
Complied with from previous year	2

Section 93, Public Health Act 1936

Served	2
Complied with by Owner	2

PRELIMINARY NOTICES

	<i>Served</i>	<i>Complied with</i>	
Public Health Act ..	47	.. 55	
Housing Act	52	.. 36	
Food and Drugs Act	31	.. 32	
Factory Act	6	.. 3	
Pests Act	2	.. 2	
	— 138	.. —	128
Voluntary Works supervised (under Building Licences, Byelaws, etc.) ..	..	.. ..	17

INFESTATIONS

All infestations were dealt with by liquid insecticide. The following infestations were dealt with during the year :—

Wasps	27
Ants	1
Beetles	2
Flies	6
Fleas	1
	—
	37
	—

HOUSING

One of the two condemned cottages which were occupied under Defence Regulations was vacated during the year, and after reconditioning the Undertaking relating to the Cottage was cancelled. The other cottage became in need of repairs which the owners could not afford to do and the Council refused to extend the Licence to occupy.

Ninety houses were inspected and recorded under the Housing Acts, and of these thirty-eight were in all respects fit ; forty-nine were unfit but repairable at reasonable cost, and three were unfit and not repairable at reasonable cost.

The works necessary to make fit sixteen of the forty-nine houses repairable at reasonable cost were completed and works had been commenced at thirteen. Eighteen houses inspected in previous years were made fit during 1952.

A basement room in respect of which an Undertaking not to use for human habitation was given in 1935 was made fit and the Undertaking cancelled.

At the end of the year seven cottages condemned before the war were still occupied, one such cottage being vacated during the year.

CARAVANS

Three licences to erect and station moveable dwellings (trailer-type caravans) within the Urban District were granted during the year.

FACTORIES

1. INSPECTIONS FOR PURPOSES OF PROVISIONS AS TO HEALTH

Premises	No. on Register	Number of		
		Inspections	Written Notices	Occupiers prosecuted
(i) Factories in which sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	24	42	—	—
(ii) Factories not included in (i) in which section 7 is enforced by the Local Authority ..	64	106	—	—
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out - workers premises)	—	—	—	—
Totals ..	88	148	—	—

2. CASES IN WHICH DEFECTS WERE FOUND

Particulars	No. of cases in which defects were found				No. of cases in which prosecutions were instituted
	Found	Remedied	Referred To H.M. Inspector	By H.M. Inspector	
Want of cleanliness (S.1)	1	3	—	2	—
Overcrowding (S.2) ..	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4)	—	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary conveniences (S.7)					
(a) Insufficient	—	—	—	—	—
(b) Unsuitable or defective	1	2	—	1	—
(c) Not separate for sexes	—	—	—	—	—
Other offences against the Act (not including offences relating to Out-work)	1	—	—	—	—
Totals ..	3	5	—	3	—

OUTWORK

(Sections 110 and 111)

Nature of Work	No. of out-workers in August list required by Sect. 110 (1) (c)	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances work in unwholesome premises	Notices served	Prosecutions
Wearing apparel— Making, etc. ..	1	—	—	—	—	—
Cleaning and Washing ..	—	—	—	—	—	—

Sections 15-44—Nil.

MEANS OF ESCAPE IN CASE OF FIRE

Number of certificates in force 20

INSPECTION AND SUPERVISION OF FOOD

Meat Inspection

There are two slaughterhouses in use in the district, one a Government-selected slaughterhouse, the other at a large institution.

During the year 7,214 animals were slaughtered at the Government Slaughterhouse, and all were inspected. There were 640 visits to the slaughterhouse and 1,181 condemnations, involving 33,611lb. of meat and offals.

Animals Slaughtered

Bulls	..	..	..	..	33
Bullocks	..	..	..	..	554
Cows	..	..	..	..	432
Heifers	..	..	..	..	447
Calves	..	..	..	..	1,134
Sheep	..	..	..	..	3,316
Pigs	..	..	..	..	1,298
					<hr/> 7,214 <hr/>

Carcases of Animals Inspected and Condemned

	Cattle ex. Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed	1,034	432	1,134	3,316	1,298
Number inspected	1,034	432	1,134	3,316	1,298
All Diseases except Tuberculosis: Whole carcases condemned..	1	5	—	3	10
Carcases of which some part or organ was condemned ..	216	127	4	475	84
Percentage of the number in- spected affected with disease other than T.B.	20.99	30.55	0.35	14.41	7.24
Tuberculosis only : Whole carcases condemned..	7	17	—	—	4
Carcases of which some part or organ was condemned ..	81	103	—	—	25
Percentage of the number in- spected affected with Tuber- culosis	8.51	27.77	—	—	2.23

The above table shows that of 432 cows slaughtered, 120 were affected with tuberculosis in some degree, whilst 252 were in some way diseased. The percentage of cows killed affected with tuberculosis (27.77) is lower than the average for the last 10 years (40 per cent.).

Of 33 bulls slaughtered, 4 were affected with tuberculosis in some degree.

Of all cattle killed (1,466) 208 were affected with tuberculosis in some degree.

All cattle killed at the Government Slaughterhouse are carefully inspected and 5 cases of cysticercus bovis were found during the year.

Slaughter of Animals Act

One licensed slaughterman had his licence renewed during the year.

OTHER FOODS

During the year there were 44 condemnations of other food involving :—

294 tins fruit	32lb. sugar	105lb. meat
20 packets biscuits	239 tins meat	102 packets pudding mixtures
34½ stone fish	75 packets cereals	19 tins fish
8lb. lard	24 tins milk	6 tins baby food
82 tins vegetables	48lb. sausages	9 tins fruit juice
28 tins soup	16 jars preserve	107lb. flour
15 packets cocoa	25 boxes cheese	12 jars paste
2 bottles squash	2 tins syrup	2 jellies

LIST OF FOOD PREMISES

Bakehouses	..	..	..	..	..	..	7
Butchers	..	..	..	..	..	..	15
Canteens	..	..	..	..	..	..	6
Confectioners	..	..	..	..	..	..	32
Dairies	..	..	..	..	..	..	5
Fishmongers	..	..	..	..	..	..	7
Fish Hawkers	..	..	..	..	..	..	3
Food Factory	..	..	..	..	..	..	1
Fried Fish Shops	..	..	..	..	..	..	3
Grocers	..	..	..	..	..	..	59
Greengrocers	..	..	..	..	..	..	14
Outside Food Kiosks	..	..	..	..	..	..	4
Public Houses	..	..	..	..	..	..	17
Restaurant Kitchens	..	..	..	..	..	..	21
Premises selling ice cream	..	..	..	..	..	..	65
Other premises registered under Section 14 Food and Drugs Act 1938	..	..	..	..	..	..	18

Below is a list of improvements effected as a result of informal notice at the various types of food premises during 1952 :—

Greengrocers

Premises cleansed	1
-------------------	----	----	----	----	----	---

Cafes

New sinks provided	..	..	..	..	..	2
Lavatory basin provided	..	..	..	..	..	1
Display facilities provided	..	..	..	..	..	2

Fishmongers

Glass display cabinet provided	1
--------------------------------	----	----	----	----	---

Bakehouses

Premises cleansed	2
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MILK SUPPLY

The following registrations were operative during 1952 :—

Dairies	5
Distributors	..	..	..	..	..	..	*12
Dealers licensed to sell T.T. milk	..	..	..	..	..	..	8
Dealers licensed to sell Pasteurised milk	..	..	..	..	..	..	5

Milk is produced at 9 farms in the district, from two of which milk is sold by retail. The nine farms comprise 6 tuberculin tested, 1 accredited and 2 ordinary milk producers.

* Includes one firm who are registered to sell cream from a foodshop in sealed containers as received from the suppliers.

SAMPLING

Tuberculin Tested Milk

Forty-seven samples of tuberculin-tested milk were taken by retail—three failing the methylene blue test.

Accredited Milk

Twelve samples of accredited milk were taken by retail—one failed the methylene blue test.

Ordinary Milk

Sixteen samples of ordinary milk were obtained by retail—all were satisfactory.

Pasteurised Milk

Sixty-seven samples of pasteurised milk were obtained and all were satisfactory.

Tuberculin-Tested Pasteurised Milk

Thirty-five samples of tuberculin-tested pasteurised milk were obtained and all were satisfactory.

Biological Examination

Fifty-two samples of milk were submitted for biological examination and all were reported free from tubercle bacilli.

ICE CREAM

There are no premises registered for the manufacture of ice cream in this district. One premise is registered for the manufacture of ice lollies. Sixty-five premises are registered for the sale of ice cream, fifty-five being restricted to the sale of wrapped ice cream.

During 1952, 88 samples of ice cream were submitted to bacteriological examination ; 42 falling within Grade I, 32 in Grade II and 14 in Grade III.

Below is a table showing the results of bacteriological examination of ice cream samples month by month.

1952 Month	No. of Samples	Methylene Blue Test							Grade		
		1½ hrs.	2 hrs.	2½ hrs.	3 hrs.	3½ hrs.	4 hrs.	4½ hrs.	I	II	III
January ..	5	—	—	—	—	—	—	5	5	—	—
February ..	—	—	—	—	—	—	—	—	—	—	—
March	5	—	—	—	—	—	—	5	5	—	—
April	8	—	—	2	1	—	—	5	5	3	—
May	14	1	—	—	1	1	2	9	9	4	1
June	9	2	—	—	5	—	2	—	—	7	2
July	15	3	1	1	—	—	2	8	8	3	4
August ..	6	—	—	—	6	—	—	—	—	6	—
September ..	10	—	3	—	—	2	4	1	1	6	3
October ..	9	—	4	—	—	—	4	1	1	4	4
November ..	7	—	—	—	—	—	2	5	5	2	—
December ..	—	—	—	—	—	—	—	—	—	—	—
Totals ..	88	6	8	3	13	3	16	39	39	35	14

DESTRUCTION OF RATS AND MICE

There were 136 complaints regarding infestations by rats or mice during 1952, and these led to the inspection of 462 premises, of which 174 were found to be infested. The Council employ a rat operative trained under the Ministry's Scheme, and this man worked at 171 premises. In addition a further 2,063 premises in the district were subjected to a routine survey. A total of 360 dead rats was found during the year.

During August a re-test of the Council's sewers was made—no infestations were found.

LICENSING OF WORK

The Senior Sanitary Inspector is responsible for the licensing of works to existing buildings unless structural alteration requiring the submission of plans is involved and during the year licenses involving £6,841 worth of works were granted.

PUBLIC SANITARY CONVENIENCES

The maintenance of certain public house conveniences at the Council's expense in return for their availability to the public throughout the day, was continued.

